

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 851817

FILED  
Mar 31, 2005  
Secretary of State

Entity Name: CENTRAL STATES ENTERPRISES, INC.

## Current Principal Place of Business:

300 INTERNATIONAL PARKWAY  
SUITE 150  
HEATHROW, FL 32746

## New Principal Place of Business:

## Current Mailing Address:

300 INTERNATIONAL PARKWAY  
SUITE 150  
HEATHROW, FL 32746

## New Mailing Address:

FEI Number: 35-1061305      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NAWROT, ROBERT  
300 INTERNATIONAL PARKWAY  
150  
HEATHROW, FL 32746 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: PEGAN, ROBERT  
Address: 1246 GLENCREST DRIVE  
City-St-Zip: HEATHROW, FL 32746

Title: STD ( ) Delete  
Name: NAWROT, ROBERT  
Address: 1317 HOFFNER AVENUE  
City-St-Zip: ORLANDO, FL 32809

Title: PD ( ) Delete  
Name: SHURA, RICHARD C  
Address: 300 INTERNATIONAL PKWY. SUITE 150  
City-St-Zip: HEATHROW, FL 32746

Title: VD ( ) Delete  
Name: CUPPLES, KEN  
Address: 529 LAKE BRITTANY CT.  
City-St-Zip: LAKE MARY, FL 32746

Title: ATAS ( ) Delete  
Name: MICHAEL, O'CONNOR  
Address: 300 INTERNATIONAL PKWY., SUITE 150  
City-St-Zip: HEATHROW, FL 32746

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: BOWEN, KENT  
Address: 39 WALDO ST  
City-St-Zip: LAKE CITY, FL 32055

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL J O'CONNOR

ATAS

03/31/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date